

## Remarkable Lives: Charlotte Tetley in conversation with Jerome Carson.

### Charlotte Tetley and Jerome Carson.

#### Abstract

**Purpose** – *The purpose of this paper is to provide a profile of Charlotte Tetley.*

**Design/methodology/approach** – *Charlotte provides a short biographical account and is then interviewed by Jerome. In the biography Charlotte talks about her long battle with mental health problems and treatments that did not help.*

**Findings** – *Charlotte's mental health problems started at the age of twelve and eased when she left home at 17. It was in her final year at University that her problems returned.*

**Research limitations/implications** – *Charlotte's story is one of not just surviving long term mental health problems, but of coping with adversity and becoming a stronger person. It is one of thousands of remarkable survivor accounts.*

**Practical implications** – *The story of the involvement of local police officers in Charlotte's admission to hospital, is once more a sad indictment of the brutality handed out to many sufferers in acute mental distress.*

**Social implications** – *Considering her background, twelve different schools, two exclusions, childhood mental health problems, Charlotte's story shows the triumph of the human mind against social disadvantage. She is "somebody who conquered the storm."*

**Originality/value** – *Charlotte was helped by her indomitable spirit, by her mother, a therapist and a friend who stood by her. She tells us she can never be the same person she was before her mental health problems, but she has grown and in the process became a stronger person.*

**Keywords** – *OCD, Survival, Hospitalisation, Anti-depressants, Compassion, Personal growth.*

## **Introduction**

I first met Charlotte a few months before her breakdown. Since then we have continued to meet on a monthly basis and she is hoping to return to University in September this year. She is one of those people that you come across occasionally in life, who seemed to have had a greater share of life's difficulties in their comparatively short lives, than many of us who have lived for twice as many years. It was Nietzsche who said, "What doesn't kill us makes us stronger." In that sense Charlotte's experiences, of which only a fraction are reported in this narrative, is stronger for having lived through them.

## **Brief biography of Charlotte Tetley.**

Over the period of twelve months, one in four people will experience some sort of mental illness ([www.mentalhealth.org.uk](http://www.mentalhealth.org.uk)). Being one of five siblings, I guess I'm the chosen one, every year, for as long as I can remember. My first contact with mental health services happened around the age of twelve. Until that time there wasn't any obvious concerns regarding my mental health, although deep down I knew there was but my mind just couldn't hide it anymore. I was given a diagnosis of obsessive compulsive disorder which I feel only accounted for the minority of issues that were affecting my life. I was prescribed sertraline and referred for cognitive behaviour therapy with the hope to reduce the symptoms of OCD and recurring depression. Both proved ineffective. Within the same year I was in hospital from taking the first of eight overdoses. I often wonder whether taking anti-depressants at thirteen years of age caused more harm than good. Either way they didn't help. My home life and education suffered, I was constantly being excluded from school and running away from home. I was uncontrollable and nobody knew of a solution. My life calmed down slightly when I moved out of my family home at seventeen, I wouldn't say my mental health improved but the relationship with my family did which helped. Apart from having counselling at college and making the odd visit to the doctors complaining of depression, I wasn't really in receipt of any help. Once discovering I was only going to be prescribed an anti-depressant medication I had already tried and being told there was nothing much more they could do to help me, I was left to

survive my own way and I did just that until last year. I certainly survived but only just.

I gave birth to my daughter during my second year of University. My family, especially my mum made it possible for me to return and complete the year as normal. Although it was hard my daughter couldn't have been born at a more perfect time, she was really meant to be. Over the course of the year my mental health started to decline again. Obsessions and compulsions returned which usually revolved around protecting my daughter, excessively checking her, feeling for certain number of breaths or completing tasks in fear of something happening to her if I didn't. Alongside the obsessive and compulsive symptoms, previous traumatic memories also came flooding back. Mood swings reappeared and I wasn't eating or sleeping. In the mean time I was having regular visits from my health visitor who thankfully recognised the deterioration in my mental health and referred me for my third attempt of cognitive behaviour therapy with mental health nurse/ CBT therapist Tom O'Gorman, who became the first and only mental health professional whom I can credit. Whilst I found the cognitive behaviour therapy yet again ineffective, he himself was therapeutic. By November, 2014 I was having visits daily from the home treatment team, I was on sick leave at work, not attending university and my daughter was staying with my mum. For the next two months I found myself stuck in a whirlwind of psychosis including delusions, hallucinations, rapid fluctuation in mood, depression, severe suicidal ideation and flashbacks, I thought I would never see the end.

I was hospitalised in December following a visit from the home treatment team and the Police. It wasn't the most dignified way of taking somebody to hospital. In fact I do not wish for their approach to be repeated. During the visit from the home treatment team I didn't want to speak to anybody, I was suicidal and emotional, I told the female worker to leave and she did, returning five minutes later with another female worker, they shouted through my letterbox to open my door and I refused. They left. Three hours later the Police were banging on my door, demanding I let them in or they would force entry. I couldn't believe they approached my door in this

way and expected me to answer. My body went in flight mode and I ran down the stairs and through my back door. In the mean-time the Police were putting my door through. I hid around the corner for ten minutes. I felt like a criminal on the run. I knew I hadn't done anything wrong so I returned. I was welcomed by one male officer who then forced me against my garden fence and placed me in a sleeper position. Another officer approached me and forced my head down whilst the other officer handcuffed my hands tightly behind my back and twisted my hands round in the process. Whilst restrained by two male officers I was then approached by a third officer who broke all my fence panels instead of using my gate and welcomed me with a knee to the leg and branded me an idiot. I remember sobbing and saying "Why are you doing this?" I was mortified. The three officers then threw me on the ground and forced my face into the concrete floor, they then pinned my body down with their knees whilst another three officers placed straps on my legs, I was carried into the house and placed on the sofa. Words cannot describe my emotions and feelings at this point. It is still very raw even now. I asked about what would happen to my door and one male officer replied "Your benefits will pay for it." Not only was I welcomed with my door being put through and assaulted by male officers, I was also being wrongfully judged. I was taken to hospital via an ambulance, as I went outside, there were two riot vans, three police vehicles and neighbours standing around wondering what all the fuss was about. It felt like the walk of shame which is a shame within itself. I shortened my hospital stay by discharging myself. My experience on the ward is another story within itself.

Overall, my faith in mental health services hasn't changed much since my adolescent years, I can only thank my family, Tom and my best friend for helping me become the survivor I am today.

### **Charlotte in conversation with Jerome.**

Jerome: What do you feel needs to change in mental health services?

Charlotte: During my most recent hospitalisation and first as an adult, it was quite apparent from the start the ward had staffing issues. The facilities were not working

correctly, the safes were out of use and the showers were only just bearable. The gym wasn't available and activities didn't run as stated. The pressure seen in staff members was obvious and I felt this had a tremendous impact on the quality of care myself and other patients received. I also feel there are a lot of mental health professionals especially psychiatrists that have the tendency not to listen to their patients. During an appointment last month I was very disturbed by the fact that my own psychiatrist did not have a clue who my mum was despite meeting her on several occasions, nor did she know my daughter was staying with her. In fact she didn't know about anything I had just experienced which I feel is very daunting considering this was a professional that was in charge of the care I was receiving. I am now in the process of changing psychiatrists in the hope I will finally get the help I deserve.

Jerome: What do you feel the Police could have done differently?

Charlotte: Firstly, I feel that the home treatment team in the beginning should have changed their approach. If I found myself in a similar situation during my time as a mental health support worker, I would have pursued the issue further before contacting the Police, by either communicating with close family members or remained with the person until I knew they were safe. The approach by the Police should have been different. I felt like they were being aggressive and treating me like a criminal. When I reflect back I realise it was the aggressive attitude and threat to put my door through that made me escape out the back door. I also feel the way in which six male officers restrained me was extremely inappropriate given my current weight and mental state at the time. I think male officers should also be aware of their own strength when dealing with the public, especially females and those who are mentally ill. I also feel that the police should have had a less judgemental attitude and expressed more compassion.

Jerome: What are your current views on medication?

Charlotte: Personally, I strongly feel that prescribing me anti-depressants as young as thirteen probably did me more harm than good. It is quite commonly known that

anti-depressant medications can have the ability to increase suicidality, especially in patients younger than twenty five. I often find myself questioning as to whether they contributed negatively to my mental health, they certainly didn't help anyway. Following my last breakdown, I am currently taking an anti-psychotic called quetiapine combined with my third attempt of the anti-depressant called mirtazapine, I am still unsure as to whether it was the medication that helped me through my last breakdown, or myself? Probably the latter.

Jerome: What are your future plans career wise?

Charlotte: My short term plans involve returning back to university in September and completing my degree, I am also hoping to return back to work and gain further experience as a mental health support worker. In the mean time I will be spending my time working on my honours project and piecing my life back together. In the long term, I wish to pursue further education and become a qualified psychologist, whether that be forensic or clinical, I am still unsure as to which path to take, either way I am looking forward to an exciting and challenging career ahead.

Jerome: How do you think mental health services can best promote recovery?

Charlotte: I feel at present there is a lot that needs to change within mental health services especially in regards to aftercare, I would say a mental health professional should possess listening skills, compassion, understanding and patience in order to best promote recovery. In fact I do not believe in recovery per se. I do not feel anybody truly recovers from their deteriorations in mental health. How could you possibly ever return back the same person? In my eyes this is virtually impossible. I feel these assets are vital for personal growth and self-awareness in order to overcome mental health problems and become a stronger person.

Jerome: Have you been inspired by any mental health professionals?

Charlotte: Although I found cognitive behaviour therapy ineffective, I do have to say my therapist is by far the best one I have seen, in the beginning I was unhappy I was

assigned a male therapist, especially given my past experiences, little did I know I would disclose something so personal to him, something I had never disclosed to anybody before. My therapist Tom O'Gorman gave me the strength to report my disclosure to the Police and I am now seeking justice. I would say he inspired me to carry on, he gave me the faith and confidence to finally let go of the past. I was only assigned six sessions of CBT which turned into twenty plus. He pushed for further sessions because he knew I needed them, even if it meant for someone to talk too, I found they helped. I am very grateful for his determination and perseverance, he could have quite easily left me to fend for myself after the six sessions but he chose to fight for the extra sessions which I feel pulled me through at the time, I will always be grateful for his hard work, he had true compassion which I feel goes a long way in becoming a competent mental health professional.

Jerome: What would you like to be remembered for?

Charlotte: I would like to be remembered as someone who made a difference in Mental Health Services however small or large that may be. I hope to be an inspiration to others and as somebody people can learn from. I attended twelve schools in total, permanently excluded from two, I was told I would never get a decent job or obtain a place in college and here I am writing about my own experiences with the hope to gain my degree in Criminological and Forensic Psychology next year. I was determined to prove everybody wrong and I have. If my personal experiences manage to help others I will have achieved my goal. Overall, I want to be remembered as somebody who conquered the storm and came out the other side as a stronger person.

Jerome: In terms of people with lived experience of mental health problems, have you come across anybody that has inspired you?

Charlotte: Yes, my mum, she is definitely someone who has inspired me to carry on and overcome my deteriorations in mental health. My mum, also known as Michelle has had several 'mental breakdowns' in the past and she has survived every single one of them, she is my rock. My mum has brought all five of us up on her own whilst

studying for her nursing degree which is inspirational in itself. My mum is somebody I truly look up to, she has supported me all the way and I will always be grateful for that. I have seen my mum survive which has helped me do the same.

## **Conclusion**

The late mental health activist and trainer Janey Antoniou, trained police officers how to deal more sensitively and humanely towards people in acute mental distress. Charlotte's experiences with the police, prior to her hospital admission, shows that this work needs to be on-going. Written off by many who came into contact with her in her teenage years, Charlotte has become a mother and next year hopes to finish her Psychology degree. Who knows what this remarkable woman will achieve in the future?

## **About the authors**

Charlotte Tetley will start the final year of her Psychology degree at the University of Bolton, Bolton, UK.

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